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§13–4305.

- (a) The purpose of the Commission is to:
 - (1) Employ a health equity framework to examine:
- (i) The health of residents of the State to the extent necessary to carry out the requirements of this section;
- (ii) Ways for units of State and local government to collaborate to implement policies that will positively impact the health of residents of the State; and
- (iii) The impact of the following factors on the health of residents of the State:
 - 1. Access to safe and affordable housing;
 - 2. Educational attainment;
 - 3. Opportunities for employment;
 - 4. Economic stability;
 - 5. Inclusion, diversity, and equity in the workplace;
 - 6. Barriers to career success and promotion in the

workplace;

- 7. Access to transportation and mobility;
- 8. Social justice;
- 9. Environmental factors;
- 10. Public safety, including the impact of crime, citizen unrest, the criminal justice system, and governmental policies that affect individuals who are in prison or released from prison; and
 - 11. Food insecurity;

- (2) Provide direct advice to the Secretary, and indirect advice to the Department's senior administrators and planners through the Secretary, regarding issues of racial, ethnic, cultural, or socioeconomic health disparities;
- (3) Facilitate coordination of the expertise and experience of the State's health and human services, housing, transportation, education, environment, community development, and labor systems in developing a comprehensive health equity plan addressing the social determinants of health; and
- (4) Set goals for health equity and prepare a plan for the State to achieve health equity in alignment with any other statewide planning activities.
 - (b) The Commission, using a health equity framework, shall:
 - (1) Examine and make recommendations regarding:
- (i) Health considerations that may be incorporated into the decision—making processes of government agencies and private sector stakeholders who interact with government agencies;
- (ii) Requirements for implicit bias training for clinicians engaged in patient care and whether the State should provide the training;
- (iii) Training for health care providers on consistent and proper collection of patient self-identified race, ethnicity, and language data to identify disparities accurately; and
- (iv) Requirements to comply with, and for enforcement of, National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards);
- (2) Foster collaboration between units of the State and local government and develop policies to improve health and reduce health inequities;
- (3) Identify measures for monitoring and advancing health equity in the State:
- (4) Establish a State plan for achieving health equity in alignment with other statewide planning activities in coordination with the State's health and human services, housing, transportation, education, environment, community development, and labor systems; and

- (5) Make recommendations and provide advice, including direct advice to the Secretary, on implementing laws and policies to improve health and reduce health inequities.
- (c) (1) The Commission may establish advisory committees to assist the Commission in the performance of its duties under this section.
- (2) An advisory committee established under this subsection may include individuals who are not members of the Commission.

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